



| Docket No. 8733.563.00 | | | | | | |
|--------------------------------|-------------------------------------|------------------------------|-----------------------------------|---------------------------------|--------------|------------------|
| Applicatio | n No. | Filing I December | Jale | Examiner Jeanne A. Di Grazio | | Art Unit 2871 |
| Applicant(s): Yon | | | | | | |
| nvention: LIQUID | CRYSTAL DI | SPLAY DEVIC | E AND MET | HOD FOR FABRICA | ATING TH | IE SAME |
| | TC | THE COMMI | SSIONER FO | OR PATENTS | | |
| Transmitted here | | | | • • | | |
| The fee has been | n calculated an | | | | | |
| | Claims | CLAIM Highest | S AS AMENI | DED | | |
| | Remaining After Amendment | Number Previously Paid | Number Extra Claims Present | Rate | | |
| Total Claims | 12 | - 20 = | 0 | X | | |
| Independent Claims | 3 | - 3 = | 0 | х | | |
| Multiple Depend | lent Claims (ch | eck if applicabl | e) | | | |
| Other fee (pleas | e specify): F | etition for Exter | sion of Time (| Two Month) | | 450.00 |
| TOTAL ADDIT | IONAL FEE FO | OR THIS AME | NDMENT: | | | |
| ■ Large Entity | | | | Small Entity | | |
| No additiona | al fee is require | d for this amer | ndment. | | | |
| ` <u> </u> | ge Deposit Acc copy of this she | | | n the amount of \$ _ | | · |
| ■ A check in the | ne amount of \$ | 450.00 | to cover | the filing fee is encl | osed. | |
| Payment by | credit card. Fo | orm PTO-2038 | is attached. | | | |
| | · is hereby auth d below. A dup | | | Deposit Account Nenclosed. | o. <u>50</u> | -0911 |
| Credit a | ny overpaymer | nt. | | | | |
| Charge a | any additional fili | | n processing f | fees required under 3 | 37 CFR 1.1 | l6 and 1.17. |
| <u>Valerie</u> | Hayes | Rey. No. 53,005 | | Dated: | April 18 | , 2005 |
| Rebecca Goldn Attorney Reg. N | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| • | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
1995, no persons are required to respond to a collection of information unless it displays a valid OMB control perwork Reduction Under the F

12/08/2004 Complete if Known

| The state of the s | | | | | |
|--|---------------------|----------------------|---------------------|--|--|
| Fee pursuant to the Consolidated App | | Application Number | 10/028,984 | | |
| FEE TRAN | SMITTAL | Filing Date | December 28, 2001 | | |
| FOR FY | 2005 | First Named Inventor | Yong Jin CHO | | |
| FURFI | 2005 | Examiner Name | Jeanne A. Di Grazio | | |
| Applicant claims small entity statu | ıs. See 37 CFR 1.27 | Art Unit | 2871 | | |
| TOTAL AMOUNT OF PAYMENT | (\$)450.00 | Attorney Docket No. | 8733.563.00 | | |
| | | | | | |

| | | | | <u> </u> | | | | |
|---|----------------|--------------------------------------|---------------|----------------------------------|----------------------------|-------------------------------|------------------------------|--|
| METHOD OF PAYMENT (check all that apply) | | | | | | | | |
| Check Credit Card Money Order Other (please identify): Deposit Account Deposit Account Number: 50-0911 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card | | | | | | | | |
| FEE CALCULATION | on on P1O-2038 | • | | | | | | |
| BASIC FILING, SEARCE Application Type | FILING | | SEARCH | FEES Small Entity Fee (\$) | EXAMINAT S Fee (\$) | ION FEES mall Entity Fee (\$) | F | ees Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _ | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _ | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _ | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _ | |
| Provisional | 200 | 100 | 0 . | 0 | 0 | 0 | - | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Each independent claim ov Multiple dependent claims | Reissues, eac | h claim over 20 eissues, each inc | and more than | in the original pa | atent he original pater | nt | Fee (\$) 50 200 360 | Small Entity Fee (\$) 25 100 180 |
| | Extra Claims | <u>Fee (\$)</u> | Fee Pai | id (\$) | | le Depende | | (0) |
| - 20 or HP = HP = highest number of total of | | oreater than 20 | _ = | | <u>Fee</u> | (\$) | Fee Paid | (2) |
| • | xtra Claims | Fee (\$) | Fee Pa | id (\$) | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = | | | | | | | | |
| Other: Petition for Extension of Time (Two Month) \$450.00 | | | | | | | | |

| SUBMITTED BY | · | | |
|----------------------|-------------------------|--------------------------------------|-----------------------------|
| Signature | Valorie P. Hayes 57,005 | Registration No. (Attorney/Agent) | Telephone (202) 496-7500 |
| Name (Print/Type) | Rebecca Goldman Rudich | 41,786 | Date April 18, 2005 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.